

JAN. 13. 2003

4:49PM

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MESSAGE:

Applicant: Mark R. Prausnitz, Jin Liu, and Thomas N. Lewis

Serial No.: 09/229,226 Art Unit: 3737

Filed: January 12, 1999 Examiner: R. Smith

For: ASSESSMENT AND CONTROL OF ACOUSTIC TISSUE EFFECTS

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JAN 13 2003

GROUP 3700

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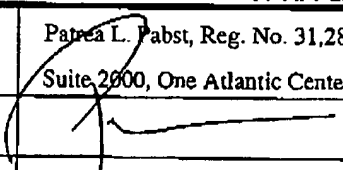
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/229,226
	Filing Date	January 12, 1999
	First Named Inventor	Mark R. Prausnitz
	Group Art Unit	3737
	Examiner Name	R. Smith
Total Number of Pages in This Submission		Attorney Docket Number GTRC 1957

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks <input style="width: 100%;" type="text"/>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Patricia L. Pabst, Reg. No. 31,284 Holland & Knight LLP Suite 2000, One Atlantic Center, 1201 West Peachtree Street, N.E.; Atlanta, GA 30309-3400
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U.S.S.N. 09/229,226]

Filed: January 12, 1999

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 215.00

Complete if Known

Application Number 09/229,226
Filing Date January 12, 1999
First Named Inventor Mark R. Prausnitz
Examiner Name R. Smith
Art Unit 3737
Attorney Docket No. GTRC 1957

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

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Deposit Account Name Holland & Knight LLP

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☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims - 20** = X =
Independent Claims - 3** = X =
Multiple Dependent =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 280	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 820*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	55.00
1252 410	2252 205	Extension for reply within second month	
1253 630	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	160.00
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to Institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 215.00

SUBMITTED BY

Name (Print/Type) Patrea L. Pabst
Signature *[Signature]*
Registration No. (Attorney/Agent) 31,284
Telephone 404-817-8473
Date January 13, 2003

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RAM Fee History Query

Revenue Accounting and Management

Name/Number: 09229226

Total Records Found: 20

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount	Mailroom Date	Payment Method
01/22/1999	00000083	<u>1</u>	<u>101</u>	\$254.00	01/12/1999	DA 012507
01/22/1999	00000084	<u>1</u>	<u>101</u>	\$506.00	01/12/1999	CK
01/22/1999	00000085	<u>1</u>	<u>103</u>	\$630.00	01/12/1999	DA 012507
03/22/1999	00000139	<u>1</u>	<u>205</u>	\$65.00	01/12/1999	CK
03/31/1999	00000125	<u>1</u>	<u>581</u>	\$40.00	03/16/1999	CK
07/14/1999	00000025	<u>1</u>	<u>104</u>	\$260.00	01/12/1999	DA 012507
08/09/1999	00000007	<u>1</u>	<u>101</u>	-\$254.00	01/12/1999	DA 012507
08/09/1999	00000008	<u>1</u>	<u>101</u>	-\$506.00	01/12/1999	OP
08/09/1999	00000009	<u>1</u>	<u>103</u>	-\$630.00	01/12/1999	DA 012507
08/09/1999	00000010	<u>1</u>	<u>104</u>	-\$260.00	01/12/1999	DA 012507
08/09/1999	00000011	<u>1</u>	<u>201</u>	\$380.00	01/12/1999	CK
08/09/1999	00000012	<u>1</u>	<u>203</u>	\$189.00	01/12/1999	DA 012507
08/09/1999	00000013	<u>1</u>	<u>203</u>	\$126.00	01/12/1999	CK
08/09/1999	00000014	<u>1</u>	<u>204</u>	\$130.00	01/12/1999	DA 012507
08/10/2001	00000041	<u>1</u>	<u>203</u>	\$18.00	08/08/2001	DA 501868
01/25/2002	00000118	<u>1</u>	<u>131</u>	\$740.00	01/22/2002	DA 501868
01/25/2002	00000119	<u>1</u>	<u>103</u>	\$234.00	01/22/2002	DA 501868
12/18/2002	00000001	<u>1</u>	<u>1201</u>	\$252.00	12/13/2002	DA 501868
01/14/2003	00000003	<u>1</u>	<u>2251</u>	\$55.00	01/13/2003	DA 501868
01/14/2003	00000004	<u>1</u>	<u>2401</u>	\$160.00	01/13/2003	DA 501868

22